

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>12</i>	<i>32</i>	<i>10/24</i>
FORMALITY REVIEW	<i>CTH</i>	<i>744</i>	<i>11/16-01</i>
RESPONSE FORMALITY REVIEW	<i>LC</i>	<i>1024</i>	<i>3-21-02</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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SCWS 704

2057/5  
3/11/01  
574  
11/15